UTILITY SUBMISSION CHECKLIST
TO BE TURNED IN BY THE UTILITY WITH SURVEY SUBMISSION

State Contract# _____ Primavera#_____ F.A.P#_____

Project Title_____

County _____ Utility Coordinator_____ Date ___/____/_____

Utility Company _____

Utility representative shall review this checklist to verify that all necessary information is included. Please sign, initial, and return with the requested information within 30 days of receipt.

Utility Verification Submittal:

Utility Representative: _____ Date: _____

[___] Reviewed survey plans.

[___] Provided marked up plans showing existing facilities. *(Electronic drawings preferred by DelDOT.) (Please mark N/A if facilities are not present within project limits.)*

[___] Provided documentation of existing easements. *(Please mark N/A if no existing easements are present within the project limits.)*

[___] Provided documentation of prior rights. *(Please mark N/A if prior rights do not exist.)*

[___] Provided documentation of a second move within the last ten years. *(Please mark N/A if does not apply.)*

UTILITY SUBMISSION CHECKLIST
TO BE TURNED IN BY THE UTILITY WITH PRELIMINARY SUBMISSION

State Contract#_____ Primavera#_____ F.A.P#_____

Project Title_____

County _____ Utility Coordinator_____ Date ___/____/_____

Utility Company _____

Utility representative shall review this checklist to verify that all necessary information is included. Please sign, initial, and return with the requested information within 30 days of receipt.

<u>Utility Verification Submittal:</u>

Utility Representative: _____ Date: _____

[___] Verified existing utilities are shown correctly on plans.

[___] Provided marked up plans showing:

[___] proposed relocated facilities.

[___] proposed additional right of way needed. *(Please mark N/A if additional R/W will not be required by your company.)*

[___] identified potential conflicts between DelDOT work and utility facilities. *(Please mark N/A if no conflicts are present.)*

[___] Draft narrative of the Utility Statement.

[___] Requested design around alternatives if applicable.

UTILITY SUBMISSION CHECKLIST
TO BE TURNED IN BY THE UTILITY WITH SEMI-FINAL SUBMISSION

State Contract#_____ Primavera#_____ F.A.P#_____

Project Title_____

County _____ Utility Coordinator_____ Date ___/____/_____

Utility Company _____

Utility representative shall review this checklist to verify that all necessary information is included. Please sign, initial, and return with the requested information within 30 days of receipt.

Utility Verification Submittal:

Utility Representative: _____ Date: _____

[___] Provided marked up plans showing any changes to proposed relocation.

[___] Verified adequate right-of-way is provided.

[___] Provided cost estimate for relocations of reimbursable work.

[___] Provided updated utility statement with the following information:

- [___] borrow needed for utility relocation.
- [___] time estimate for relocation.
- [___] time required to acquire materials.

[___] Identified any relocation that can occur in advance of the contract.

UTILITY SUBMISSION CHECKLIST
TO BE TURNED IN BY THE UTILITY WITH FINAL SUBMISSION

State Contract#_____ Primavera#_____ F.A.P#_____

Project Title_____

County _____ Utility Coordinator_____ Date ___/____/_____

Utility Company _____

Utility representative shall review this checklist to verify that all necessary information is included. Please sign, initial, and return with the requested information within 30 days of receipt.

<u>Utility Verification Submittal:</u>

Utility Representative: _____ Date: _____

[___] Concurrence on final utility statement and bar chart. *(Initialing here signifies that you have reviewed and concur with utility statement and bar chart. By initialing here your company agrees to perform the work as stated and within the time frame stated.)*

[___] Returned signed reimbursement agreement.

[___] Requested NTP for advanced utility relocations.

[___] Requested NTP to order materials on items with long lead time.